

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

101-530643

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
17		1				
18		1				
19		1				
20		1				
21		1				
22		1				
23		1				
24	1					
25		1				
26		1				
27	1					
28		1				
29	1					
30		1				
31		2				
32		2				
33	1					
34		1				
35		1				
36		1				
37		1				
38		1				
39		2				
40		2				
41		2				
42		2				
43		2				
44		2				
45		2				
46		2				
47		2				
48		2				
49		2				
50		2				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		2				
52		2				
53		2				
54		2				
55		2				
56		2				
57		2				
58		2				
59		2				
60	1					
61		1				
62		1				
63		1				
64		1				
65		1				
66		1				
67		1				
68		1				
69		1				
70		1				
71		1				
72		1				
73		1				
74		1				
75		1				
76		1				
77		1				
78		1				
79		1				
80		1				
81		1				
82		1				
83		1				
84		1				
85		1				
86		1				
87		1				
88		1				
89		1				
90		1				
91		1				
92		1				
93		1				
94		1				
95		1				
96		1				
97		1				
98		1				
99		2				
100		1				
TOTAL IND.		↓		↓		↓
TOTAL DEP.	←		←		←	
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO. APPLICANT(S)	FILING DATE
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**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
101		1				
102		1				
103		1				
104		2				
105		1				
106		2		1		
107		2				
108		1				
109		1				
110		2				
111		1				
112		1				
113		1				
114		1				
115		1				
116		3		1		
117		1				
118		1				
119		1				
120		3				
121		3				
122		3				
123		3				
124		3				
125		3				
126		0		2		
127		0				
128		2				
129		0				
130		0				
131		2				
132		2				
133		2				
134		2				
135		2				
136		2				
137		2				
138		2				
139		2				
140		2				
141		2		1		
142		2				
143		2				
144		2				
145		2				
146	1					
147		2				
148		2				
149		2				
150		2				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
151		3				
152		3				
153		3				
154		3				
155		3				
156		3				
157		3				
158		2				
159		2				
160		2				
161		2				
162	1					
163		1				
164		1				
165		1				
166		1				
167		3				
168		2				
169		2				
170		2				
171		2				
172		2				
173		3		1		
174		3		1		
175		3		1		
176		3				
177		3				
178		3				
179		3				
180		3		1		
181		3				
182		3				
183		3				
184		3				
185		3		1		
186		3				
187		3				
188		3				
189		3				
190		3		1		
191		3				
192		3				
193		0				
194		0				
195		3				
196		3		1		
197		3				
198		3		1		
199		3				
200		3				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10630643

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
201		3				
202		3				
203		3				
204		3				
205		3				
206		3				
207		3				
208		3				
209		3				
210		3				
211		3				
212		3				
213		3				
214		3				
215		3				
216		3				
217		3				
218		3				
219						
220						
221						
222						
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50						
TOTAL IND.	8		1			
TOTAL DEP.	380		31			
TOTAL CLAIMS	388		32			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

*Lawrence*